

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

JULY 1, 1987

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2				1		
3					1	
4			1			
5				1		
6					1	
7				1		
8				1		
9				1		
10			1			
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TOTAL IND.			↓	↓	↓	
TOTAL DEP.	←		14	←	←	
TOTAL CLAIMS			14			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓	↓	↓	
TOTAL DEP.	←		↓	↓	←	
TOTAL CLAIMS			↓	↓	←	